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Suzanne Maniss Ph.D.

The University of Texas Rio Grande Valley, suzanne.maniss@utrgv.edu

Yuleinys A. Castillo Ph.D.

California State University, Fresno, yacastillo@csufresno.edu

Jason Cartwright

Texas Workforce Comission, Jtcartwright5@gmail.com

Selma d. Yznaga Ph.D.

The University of Texas Rio Grande Valley, selma.yznaga@utrgv.edu

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Crisis Counseling Self-Efficacy: Personal Abilities and Situational Influences

Due to their unexpected and shocking nature, crises can affect the well-being of individuals, the counseling process, and social environments. In counseling, crisis situations are happening at an increasing rate as many clients present with the continuous threat of impending crises and emergencies (da Silva et al., 2015). Since crisis situations do not occur in an identical way, it is difficult to develop a standardized method of managing crises (Sawyer et al., 2013). Most clients who present in a crisis state experience chronic mental illness, acute interpersonal problems in social environments, or a combination of the two (James & Gilliland, 2016). Since crises occur frequently as issues in counseling, counselors need to be prepared to react appropriately to the uncertainty, stress, and needs of their clients while effectively assisting them to cope with the crisis situations in their lives.

Professional counselors of many specializations acknowledge the importance of competence with crisis prevention and intervention skills (Allen et al., 2002; Johnson & Brookover, 2020; King et al., 1999; Solmonson & Killam, 2013). The Council for Accreditation of Counseling and Related Educational Programs (CACREP), the national accrediting body for counselor education programs, also recognizes the significance of crisis counseling skills (CACREP, 2016). According to the 2016 CACREP Standards, accredited counselor education programs must teach future counselors about the effects of crises on diverse individuals across the lifespan (2.F.3.g) as well as interventions for dealing with crises (2.F.5.m). In spite of these CACREP requirements, research shows that counselors frequently do not feel adequately prepared to manage crisis situations upon graduation from their training programs (Bigante, 2007; Solmonson & Killam, 2013). For many counselors, crisis management theory has not adequately moved from the acquisition of knowledge to the application of skills due to inauthentic assignments and inadequate field experiences (Barrio et al., 2011; Binkley & Leibert, 2015; Hansel et al., 2011).

Understanding a Crisis

Crises occur in a diversity of situations and in a variety of forms following traumatic events. According to Flannery and Everly (2000), a crisis is any situation or series of events that creates a downward spiral which threatens to harm or negatively impact people, and which cannot be solved with typical coping strategies. Additionally, a crisis can be an event that overwhelms the ability of an individual to use existing resources to cope (Parikh & Morris, 2011) and that acutely exacerbates long-standing personal difficulties or behavioral emergencies (Dupre et al., 2014). Ultimately, a crisis creates a state of disequilibrium when a person reaches a point where resources and coping mechanisms are stretched too far (Miller, 2012).

Crises can be triggered by a wide variety of problems including terrorism, natural disasters, health-related pandemics, suicide, child/elder abuse, violence, domestic abuse, post-traumatic stress disorder, grief, death, terminal/critical illness, drug abuse, major unplanned events, life transitions (divorce, children leaving home, pregnancy), accidents, vicarious trauma, and human made disasters (Bigante, 2007; Dupre et al., 2014; Sawyer et al., 2013; Qiu et al., 2017). Most crisis situations involve a complex interworking of clinical, systemic, cultural, and environmental factors as well as preexisting, clinically significant behavioral and psychological conditions, and challenging life circumstances related to the crisis (Dupre, et al., 2014). Thus, it is important to train future counselors to recognize the potential warning signs of an impending crisis so that it can be avoided or its impact lessened.

Counselor Crisis Self-efficacy

According to Bandura's Social Cognitive Theory, which addresses the role of cognitive,

behavioral, personal, and environmental interactions influencing behavior, self-efficacy is an individual's belief about or perception of his/her ability to behave in such a way as to reach a specific level of performance on tasks (Bandura, 1997; Crothers et al., 2008). Bandura (1997) theorized that behavior was a result of cognitive representations of the task combined with one's beliefs about his/her ability to execute the behavior. For counselors, Bandura (1997) theorized that increasing self-efficacy could increase performance levels and decrease levels of anxiety. As a result of higher self-efficacy, counselors are better prepared to set appropriately challenging goals and offer encouraging thoughts to clients (Larson & Daniels, 1998).

Self-efficacy consists of efficacy expectations, outcome expectations, and outcome values related to confidence and comfort in one's ability to manage crises (Allen et al., 2002) Counselor self-efficacy represents "a counselor's beliefs or judgments about his or her capacities to effectively counsel a client in the near future" (Larson & Daniels, 1998, p. 180). Initially, counselors-in-training (CIT) tend to experience lower self-efficacy and higher levels of anxiety (Stoltenberg & McNeil, 2010). Their perceptions of their preparedness to handle a crisis (Sawyer et al., 2013) as well as any negative emotions they might be experiencing (Larson & Daniels, 1998) can influence their perceived self-efficacy. Perceptions and assessment of one's abilities to manage a crisis can affect their counseling self-efficacy impacting counseling skills, relationship with clients, and crisis management skills.

Crisis Counseling Management

Any type of crisis can lead to affective, behavioral, and cognitive disorganization and changes in functioning (James, 2008). Because an individual's subjective appraisal of and reaction to a stressful or troubling event may lead to the development of a crisis situation or reaction, counselors need to understand the varying ways that individuals may react to potentially traumatic events (Roberts, 2005). For example, appraising an event as detrimental, toxic, or even unmanageable can have an adverse impact on an individual's perceived ability to cope with it (Dziegielewski & Powers, 2005). To the extent that crises may elicit negative emotions, behaviors, or changes in functioning, they also represent opportunities for the individuals to grow and change in positive ways (Roberts, 2005). Counselors, therefore, help clients return to normal or improved functioning after addressing the impact of the crisis (Morris & Minton, 2012).

Due to the complex factors involved in most crises, intervention tends to involve multiple professionals, often from a variety of disciplines or roles. For example, in a school setting, a response to a crisis frequently involves a diverse group of school personnel: administrators, teachers, nurses, social workers, school psychologists, counselors, and parents (Bigante, 2007). In order to remain effective during the initial chaos or uncertainty of a crisis, an intervention team must have a comprehensive, thoughtful, well-rehearsed plan that allows for flexibility, but that remains organized and useful as the crisis unfolds (Crepeau-Hobson, et al., 2012). Moreover, the team must collaborate with one another to develop, implement, evaluate, and update these plans as needed. Since every crisis situation is unique, counselors and other members of the intervention team must also anticipate and train for flexibility of action in order to provide the individualized response needed for each situation.

According to CACREP standards, counselors are responsible for providing crisis assessment, referral, and intervention (Morris & Minton, 2012). CACREP also states that counselors must understand the impact of crisis on people, and the principles behind crisis intervention (Sawyer et al., 2013). Despite 2016 CACREP standards identifying the counselor's responsibility in a crisis situation, they provide limited crisis training standards for accredited

programs to use as guidelines. However, counselors are expected to work with the impact of crisis on clients' lives in their practices. While training plays a significant role in counselors' crisis management competence, other potential factors also contribute to their reactions to crisis situations.

Personal Characteristics

There are some qualities that can help counselors handling a crisis, including the ability to be empathetic, flexible, compassionate, resilient, collaborative, flexible, and emotionally stable and supportive (Ottens et al., 2009). Moreover, they must a) maintain appropriate boundaries, b) possess proper knowledge and/or education and professional development experiences including role-play or mock crisis training, and c) demonstrate self-control and the ability to refrain from over-reacting. Bigante (2007) identified negative personal qualities or behaviors that are detrimental to the successful management of crises by school counselors in particular. These include defying authority orleadership, resisting team efforts, ignoring guidelines, using inappropriate humor, starting or perpetuating rumors, resisting feedback, and lacking empathy and emotional stability.

When working with clients experiencing crisis situations, counselors may have a variety of personal reactions such as physical or psychological stress including anger, shock, confusion, insomnia, demoralization, and vicarious traumatization (Dupre et al. 2014). Other negative reactions to crises can include over identifying with the client, misguided rescue attempts, or assuming an unnecessary amount of responsibility for fixing complex situations (Dupre et al., 2014). Even after an event has transpired, McAdams and Keener (2008) stated that crisis can have a negative impact on the counselor's sense of self-efficacy.

Crisis Management Training

Crisis management training has been found effective in preparing future counselors to manage a crisis and in the successful outcome of intervention (Sawyer et al., 2013). Counselors' training, including initial clinical experiences, influences their levels of self-efficacy. Larson and Daniels (1998) suggested that self-efficacy, which plays a vital role in counselor competence, facilitated the preparation of future counselors. Moreover, Kozina et al. (2010) reported that the level of counseling self-efficacy increased during initial work with clients during clinical experience among first year masters' level counseling students. Similarly, Melchert et al. (1996) described that counseling students had higher levels of self-efficacy after gaining experience and preparation in school. Finally, the level of self-efficacy of counseling students increased with the completion of coursework and fulfilled internship hours (Tang et al., 2004).

In a previous study (Sawyer et al., 2013), CITs completed a Crisis Preparation Response Program covering theoretical models, intervention strategies and other relevant crisis information. Prior to taking the course, the CITs were asked to complete a self-efficacy evaluation survey measuring how prepared they felt to manage a crisis situation. By the end of the course, the self-efficacy of all the participants had increased after learning pertinent crisis information. A crisis management training increased CITs' self-efficacy related to crisis management. Hence, crisis preparation programs can help to boost CITs preparation to effectively handle a crisis.

In a study of school counselors, although many schools incorporate crisis intervention plans, some counselors still reported not feeling adequately prepared to deal with a crisis (Bigante, 2007; Solmonson & Killam, 2013). School counselors involved in this study expressed a desire for proper training in crisis prevention and intervention through counselor education programs and continuing education. However, scant literature covering crisis preparation and

practice experiences for professional counselors is available (Morris & Minton, 2012). Additionally, a review of the literature found no methods for counselor educators to prepare counseling trainees for crisis intervention (Barrio et al., 2011). Even though counseling crisis management and preparation training has been found to be effective among counselors, there seems to be limited opportunities and research specific to counselors.

Support System

Beyond preparation programs, other factors can also improve the self-efficacy of counseling students. Providing opportunities for modeling and practicing counseling skills can help trainees to build self-efficacy (Mullen, et al., 2015). Similarly, a school climate can also influence counselors' self-efficacy, especially when it offers a conducive environment (Haron, Wan Jaafar, & Baba, 2010). Research has shown that a positive supervisory working alliance could help counseling trainees improve their counseling self-efficacy (Humeidan, 2002; Larson & Daniels, 1998). Additionally, crisis supervision was seen as a tool for building on the counselor's crisis management skills, and professional development (Dupre, et al., 2014).

Though some studies have examined factors influencing self-efficacy, additional research can be targeted to increase the understanding of crisis counseling self-efficacy. Identifying factors shaping counseling trainees' self-efficacy can help with preparation, supervision, and performance. This study reports on future counselors' description of self-efficacy in crisis situations. More precisely, the purpose of this qualitative study was an analysis of counselor trainees' responses related to their perceptions of how personal and environmental factors influence their abilities when dealing with crisis. In order to contribute to the knowledge on crisis counseling self-efficacy, the research question for the study was: how do personal and environmental factors affect counselors in training's perceived ability to handle a crisis?

Method

The intent of this study was to investigate the perceptions of self-efficacy of CITS related to crisis intervention and management. Semi-structured, open-ended questions posed in a focus group setting were used to explore the students' perceptions. The resulting data, derived through an analysis of the transcripts of the focus group discussions, offered insights into students' beliefs about their abilities to work with clients dealing with a crisis and provided some suggestions for counselor training programs.

Design

Focus groups, an applied research method structured to facilitate the exploration of topics and participants' experiences, were utilized to elicit information about perceptions of self-efficacy among CITs (Stewart & Shamdasani, 1990). The focus group allowed CITs to share and consider their own beliefs and experiences related to crisis management. Following a brief summary of the research and potential audience for results, completion of an approved consent form, and an introduction to the open-ended questions for guiding the discussion, the discussion ensued facilitated by a counselor educator employed as a faculty member in a university in the southwestern United States. After an overview of the research project, students were asked to identify perceived helpful personal characteristics; describe the role of training; and assess the impact of personal experiences on crisis counseling. Following the discussion, the students selected pseudonyms comprised of a combination of letters and numbers as identification codes to protect the anonymity and confidentiality of each CIT. The facilitator explained the data analysis process and steps for securing the data. Finally, students were thanked for their participation.

Participants

Students enrolled in a graduate counselor education program at a regional, rural, state university were invited to participate in the focus group. Ten CITs, seven females and three males who were currently enrolled in graduate counseling courses volunteered to participate. The CITs provided demographic information including ethnicity, gender, current status in their graduate program, and the location where they were raised. Eight of the CITs identified as White or Caucasian and two as African American. The age of CITs ranged between 23 to 41 years old. All 10 students lacked one or two courses in addition to the completion of a practicum and internship. Additionally, all 10 were natives of the same state with six from rural communities and four from urban areas.

Data Collection

Since crises are common concerns for clients in counseling, the purpose of this study was to evaluate CITs' perceptions of their abilities to manage crises. After receiving approval from the Institutional Review Board (IRB), the researchers developed a semi-structuredinterview protocol and used purposive sampling to identify participants for the focus group (Palinkas et al, 2015; Patton, 2002; Stewart & Shamdasani, 1990). The interview protocol included demographic questions related to the students' gender, age, ethnicity, and place of upbringing as well as openended questions about their perceived abilities to intervene or manage crisis situations. The facilitator provided opportunities for each participant to respond to the question prompts individually and for group discussion during the 90-minute focus group. The focus group was recorded, and participants created pseudonyms for transcription and coding purposes.

Data Analysis

Content analysis, a research approach that identifies the presence of words, concepts, or themes within a body of text (e.g., interviews, conversations, speeches, essays) and scrutinizes those items for common themes, threads, or relationships, was used to analyze the transcribed responses. Conventional content analysis transforms a large amount of data into an organized summary of key results (Erlingsson & Brysiewicz, 2017; Krippendorff, 2004). Due to the nature of this study, the researchers elected to use a constant comparative method to code the data into categories for organization and conceptualization (Dey, 1993; Kolb, 2012). Each researcher individually reviewed transcripts for salient terms and themes and created distinct categories. The investigators then presented, discussed, and compared their individual analyses with the other researchers. This open review and discussion among researchers helped to reveal areas of discrepancy and aided in the identification of commonalities. Upon completion of the individual and group levels of review, an additional review and analysis was completed by an independent counselor educator after which the research team members developed a mutually agreed upon coding system. Finally, having created an appropriate coding system, the researchers provided the data to two of the CITs, reviewed the analyses and affirmed the conceptsand themes.

Results

Analysis of data gathered from the focus group resulted in the identification of two major themes: strengths and weaknesses (Table 1). Even though students expressed some concerns about their ability to handle a crisis, they recognized the value of training on crisis interventions and techniques. Students explained receiving information on crisis and trauma indifferent courses in their program. Each identified theme included sub themes concerning strengths and weaknesses. Counselors-in-training recognized potential limitations to working effectively in a counseling session with clients experiencing crises. Students recognized a combination of individual and preparation factors that hinder effective work with crises. These limitations could be addressed through training programs and supervision.

Crisis Intervention Training

This theme captured perceived potential strengths and limitations of crisis management training. Counselors-in-training described qualities of training that could shape their ability to handle a crisis. These strengths could be utilized along with the recommendations to improve crisis management preparation.

Strengths. This category detailed the perceived positive attributes of counseling training programs. All CITs expressed that class material facilitated the development of counseling skills to facilitate crisis interventions. Three CITs emphasized the value of exposure to diversity issues which increased their cultural competence in crisis management. One expressed that being open to learn about the "cultural values of others" can be very helpful in crisis management. Similarly, four CITs emphasized the role of cultural competency when counseling a client in crisis. Likewise, participants accentuated the importance of a holistic counseling approach to understand the "multidimensional parts of any crisis." Finally, two CITs highlighted their crisis counseling course as prized in preparation for crisis handling in sessions.

Shortcomings. Participants described parts of their education that could negatively impact crisis management. One CIT explained how a lack of proper diversity training could result in cultural insensitivity during a crisis. Another CIT expounded upon potential challenges of dealing with his/her own feeling of anxiety without proper preparation. A CIT expressed concerns that their training could translate to a "one-size-fits all" mentality. Moreover, two CITs detailed the focus of self-care in their counseling training; however, they also recognized their inability to appropriately take care of self as a future professional. "Self-care can help with a crisis, but my own practices may be inadequate." Finally, three CITs explained that limited crisis counseling preparation could affect their ability to handle crisis situations.

Counselor Dispositions

This theme captured perceived individuals' strengths and limitations when handling a crisis. Participants envisioned personal attributes that play a role in crisis counseling. These individuals' characteristics can be acknowledged using self-awareness practices and incorporated into proper crisis management training.

Strengths. This subtheme focused on participants' abilities to work with clients experiencing crises. All CITs identified at least one personal characteristic that could help with crisis interventions. One participated stated that "organizational skills, self-awareness, and calmness uniquely mesh together" while another added "resilience and my ability to remain unnerved in hectic situations" as valuable qualities in crisis counseling. Six CITs recognized resiliency as crucial for crisis intervention with one expressing that resiliency "is the natural ability to bounce back after adversity." Two CITs also accentuated the role of self-awareness to "identify opportunities to improve" and "recognize personal emotional needs." Moreover, one CIT added that "calmness--in the storm of crisis situations-- provides a safe place for people." Being a caring provider was also discussed as a valuable skill for handling a crisis and facilitating change. Finally, one CIT shared that being optimistic could help to "see situations with a positive light" to mend attitudes and reactions towards the crisis.

Shortcomings. Participants also shared concerns about their personal abilities, knowledge, and understanding of crisis counseling. Two CITs mentioned their lack of experience working with traumatic events while another expressed poor emotional reaction to these events. One participant described having a "hard time holding back emotions when speaking with someone who has been in similar situations as my loved ones." Students explained the potential negative impact of inadequate self-care practices, poor separation of workfrom personal roles, and

emotional fatigue. Two participants described being distressed with "caring too much about my clients too quickly," leading to feeling overwhelmed and exhausted. Lastly, two CITs expressed personal struggles with ambiguity with one describing a potential "conflict with the nature of crisis because of its tendency to be unpredictable."

Counseling Skills

This theme captured the perceived value of proper counseling skills needed in crisis management. Participants detailed helpful counseling skills that could improve their ability to handle a crisis. These observations emphasized the value of learning proper skills in training.

Strengths. This subtheme focused on relevant crisis counseling skills. Three CITs strongly supported the learning of crisis counseling skills to help to convey a message "of support and care to clients." The focus group identified active listening, attending skills, empathy, silence, and reflections as valuable competencies during a crisis. Moreover, CITs explained that mastery of counseling skills can be very helpful when working with a client in crisis. Two CITs explained that learning to accept clients as they are without judgment can help with a crisis.

Shortcomings. This subtheme captured the perceived potential misuse of counseling skills in session. Four CITs expressed concerns about poor nonverbal communication patterns (e.g., poor body position, arms crossed, facial expression) while others discussed ill-timed reflections of feelings and content. Regarding poor nonverbal communication, one CIT further explained that "a body position could communicate to the client that I am not interested in what they are saying." Two CITs pointed out a need to improve their vocabulary to effectively use reflections and summaries.

Support Systems

This theme captured perceived potential strengths and limitations of support systems. Participants described environmental forces that could affect their ability to properly counsel a client experiencing a crisis. These external characteristics could be considered in training or during employment.

Strengths. This subtheme described different social pillars that aid in effectively preparing counselors to address a crisis. Three CITs explained how family can "translate to a strength to combat emotional reactions to a crisis." One CIT shared that family "helps to channel my energy into something positive, even on the rough days." Another explained that "ambiguity and flexibility are welcome for our family system, which has its advantages when weare considering crisis counseling work." Similarly, another CIT elucidated how a supportive social network of family and friends "can help attune to emotional and psychological needs."

Shortcomings. This subtheme described potential challenges in the support system that can affect crisis management. Two CITs stated that bad supervision can negatively affect their abilities to handle a crisis with one asserting that "a bad supervisor can definitely affect my trust on my own abilities to handle a crisis." In addition, three CITs wondered about the impact of home issues that could interfere with their focus on a crisis in a session. One CIT voiced that a healthy home/work balance can potentially impact the reaction to a crisis. Moreover, another CIT expressed that failure to consider multiple solutions can hinder the counseling process because the client or provider might not be willing to consider other ideas.

Table 1: Focus Groups: Themes Identified

Theme	Strengths	Shortcomings
Training	Quality & relevant crisis material Culturally sensitive training	Inadequate crisis preparation Poor self-care aptitudes
Counselor Disposition	Value of personal traits Mindset to effective crisis management	Insufficient crisis management experience Poor emotional control
Counseling Skills	Core counseling skills Effective listening skills	Poor use of counseling skills Misread nonverbal cues
Support Systems	Treasured social and professional pillars Significance of support systems	Limited supervisory support Struggles with life/work balance

Discussion

This study aims to add to the understanding of crisis counseling self-efficacy by identifying perceived strengths and weaknesses among CITs. This information can inform training programs, supervisors, and counselors responsible for crisis management in sessions and in education. For counselors and supervisors in practice, these findings can provide valuable information for additional training and teaching opportunities. Additionally, these findings can help to enhance mechanism to improve CITs crisis counseling self-efficacy to improve crisis management.

Self-efficacy can influence behaviors, decision making, and rapport in crisis counseling. Self-efficacy can be a criticalvariable in the perceived preparedness among beginning counselors faced with crisis situations (Sawyer et al., 2013). This research proposed to add to the understanding of the preparation of futurecounselors to work with crises. The results of this study suggested that perceived strengths and weaknesses could affect the perceived self-efficacy of beginning counselors to handle crisis situations. Furthermore, the findings from this study could help to improve crisis counseling training, enhance supervision, and increase self-awareness.

Counselors can increase their ability to perform well in crisis management by influencing their self-efficacy. Proper training can lead to adaptive responses in crisis resulting in compassion, satisfaction, and the perceived efficacy of counselors from their work (Lambert & Lawson, 2013). Counselors in training in this study reported that crisis counseling training helped to boost their confidence to work with a client in crisis. Unfortunately, many times counselors reported minimal to no preparation regarding crisis, crisis intervention skills, and

crisis case management skills (Morris & Minton, 2012). The quality of training and skills development during graduate school as well as recognizing individual capabilities can help counselors better handle clients' crises. Counselors can use adaptive responses to support post-traumatic growth while enhancing the counselors' skills, strengths, and abilities to address a crisis (Cohen & Cohen, 2013).

The value of support systems can enhance one's self-perceived ability to work with a client in crisis. Counselors in training indicated that having a positive support system boosted their abilities to work with clients in crisis. For instance, a consultation process with program coordinators, supervisors, and CITs can aid in determining treatment for crisis counseling (Cardona et al., 2013). Having supportive supervision combined with a supportive training program can help in increasing CITs' ability to work with a client in crisis. Moreover, CITs preparation to effectively balance work and personal demands can also aid their crisis management skills.

Adequate training is important to reduce vicarious traumatization of counselors and evade potential harmful relationships with clients. Counselors in training in this study voiced concerns related to insufficient training that could result in unprofessional and unethical handling of a crisis. Forcounselors, it is imperative to be self-aware in their approach to avoid harming clients (Werner,2007). In this study, CITs explained that poor self-care practices could potentially lead to burnout and emotional fatigue. Self-care practices can become protective factors for providers while increasing their resilience (Merriman, 2015). In addition, self-care practices support the American Counseling Association's mandate to engage in self-care activities to support ethical responsibilities (ACA, 2014).

Counselors need to closely monitor potential emotional exhaustion, poor counseling skills, and lack of proper crisis training as hindrances to crisis management. Educating counselors on crisis intervention, potential client issues, psychosocial implications, and self-awareness can reduce the risk for compassion fatigue (Merriman, 2015). In this study, CITs pointed out that recognizing their personal characteristics would be helpful in crisis counseling. Counselors can monitor their emotions to embrace positive personal and professional perspectives to increase their self-awareness as well as their ability to effectively manage their emotions (Castillo et al., 2019; Ling et al., 2014). As new helping professionals, CITs may fail to properly care for themselves and learn to properly manage their emotions leading to burnouts and compassion fatigue.

Implications for Counselor Education

Due to the nature and potential consequences of crises, CITs need to understand the impact of crisis and be competent in the utilization of suitable crisis interventions. Proper training, including knowledge and skills, plus access to crisis management resources can provide the skills CITs need to work effectively with clients in crises. Because crises, such as a worldwide pandemic or hurricane, can affect access to health care, result in lost income, and weaken systemic structures providing community services (Braunack-Mayere et al., 2010), appropriate preparation for crisis situations is crucial for CITs.

Crisis intervention theory and practice is complex and can affect a majority of the issues presented in counseling to some degree or another. Consequently, programs should weave crisis education throughout the program's curriculum (Dupre et al., 2014; Morris & Minton, 2012). CITs report that they felt better prepared to manage crises when they received theoretical strategies for approaching crisis (Sawyer et al., 2013). Crisis theories and models must be understood in the context of theory, psychopathology, multicultural counseling, family

counseling, substance-use counseling, and other areas of study in counselor education programs. Although the CACREP (2016) standards identify the importance of training in crisis responses, most CITs and new professionals could benefit from additional training on crisis interventions, prevention and planning (Binkley & Leibert, 2015).

Crisis training can limit the overall impact of crises for clients and their families and, consequently, for the public at large while occasionally lessening or preventing their occurrence (McAdams & Keener, 2008). It is important that crisis intervention training include knowledge and helping strategies that are sensitive to diversity (Bowman & Roysircar, 2011). When assessing and selecting interventions, counselors need to consider psychosocial stressors, communication styles, access to technology, values, help-seeking behaviors, natural healing practices, and other cultural practices of the individuals and communities in crisis. Supervisors need to be willing to address multiculturalissues to build a strong working alliance with CITs or newly licensed counselors (Crockett, & Hays, 2015; Chopra, 2013) and to address any diversity concerns impacting crisis management. Additionally, crisis training should consider the role of telehealth in service delivery from an ethical angle considering access and diversity issues (Castillo & Cartwright, 2018).

At best, most counselor education programs offer a single course covering crisis intervention models and strategies. Other times, the information is specific to a context and embedded in other courses (e.g., suicide prevention in a psychopathology course, school crisis plans in a school counseling course). Often, the stand-alone courses are not part of the required curriculum (Dupre, et al., 2014). However, in addition to didactic content, Bigante (2007) reports that direct exposure to crisis prevention, management and intervention through practicum and internship courses was identified by counselors as the best opportunity for training in crisis situations because of the application and experiential nature of the courses.

Another critical part of training and licensure is supervision. Once a crisis situation occurs, whether it be during a training program or out in the field, counselors identified clinical supervision as necessary to resolving the situation (Dupre, et al., 2014). Supervisors can support supervisees' struggles and success with crisis management. Effective supervision is key to translating knowledge gained in the training program into clinical practice (McAdams & Keener, 2008). Moreover, supervision can contribute to higher levels of self-efficacy in new counselors concerning counseling skills (Dupre et al., 2014). Therefore, supervisors play an important part in crisis management skills among new counselors by providing constructive feedback, support, and different perspectives.

Considering self-care practices and self-awareness in training can be beneficial for counselors. Self-care practices can help providers become resilient and develop self-awareness about their positive personal characteristics and external resources (Bowman & Roysircar, 2011). Likewise, counselors need to engage in self-awareness practice to recognize any possible personal limitations impacting crisis counseling (Dupre, et al. 2014). In this study, participants mentioned the potential impact of personal reactions inhibiting the ability to bracket emotions when working with a crisis. This inadequate process of emotions could affect the counseling process and lead to emotional exhaustion and reduced self-awareness. It is very difficult for a counselor to help others bounce back from a crisis if the counselor's own personal resources have deteriorated (Sawyer et al. 2013). Thus, teaching and embracing self-care practices can facilitate crisis management among counselors as they learn to care of self properly.

Even though this study has strengths, there are limitations for consideration as well. Counselors in training in this study included a small sample from a graduate program that may not represent an in-depth depiction of perceptions related to crisis management. Another limitation is the short time allotted to explore factors affecting participants' ability to work with clients in crisis. Due to the need of crisis management training, future research could focus on several components: 1) increase the understanding of crisis management when working with a client in session among counselors in training; 2) assess the impact of experiential courses in handling a crisis; and 3) conduct a long-term study to evaluate the influence of training on counselors after graduating from college. Since crises are fairly common in counseling, counselors benefit from proper crisis management training to provide effective crisis intervention, incorporate coping mechanisms, and diffuse elevated emotions in sessions. Supervisors, training programs, and providers can utilize multiple capabilities to effectively handle a crisis while considering diversity issues and cultural context.

This study aided to increase the understanding of factors affecting crisis counseling self-efficacy among counselors. The findings provide valuable information about the perceived abilities of CITs for crisis management. This information assists in program development and training needs for counselors related to crisis management and interventions. Moreover, this study supports the significance of quality training for effective crisis management with enhanced technological and ethical principles.

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